UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549
FORM D

FORM D

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D

SECTION 4(6), AND/OR

ORM LIMITED OFFERING EXEMPTION

1040765

OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per response . . . 16.00

SE	C USE ONLY
Prefix	Serial
DA'	TE RECEIVED

	***					
Name of Offering (☐ check if this	is an amendment and	name has chan	ged, and indicat	e change.)		
Vornado Realty L.P. Class	A Units of Limited Pa	artnership Intere	est			
Filing Under (Check box(es) that ap	ply):   Rule 504	☐ Rule 505	□ Rule 506	☐ Section 4	(6) ULOE	
Type of Filing: New Filing	Amendment					
		A. BASIC IDI	ENTIFICATIO	N DATA		0202000
1. Enter the information requested a	bout the issuer					02039083
Name of Issuer (☐ check if this isVornado Realty L.P	an amendment and n	ame has change	d, and indicate o	change.)		
Address of Executive Offices		(Number and S	treet, City, State	e, Zip Code)		ber (Including Area Code)
888 Seventh Avenue, New York,	New York 10019	. <u></u>	<u></u>		212-894-7000	
Address of Principal Business Opera		(Number and S	treet, City, State	e, Zip Code)	Telephone Num	ber (Including Area Code)
(if different from Executive Office 210 Rt. 4E, Paramus, New Jersey					201-587-1000	
Brief Description of Business		<del></del>				
Vornado Realty L.P. owns, leases Midlantic regions.	and redevelops and n	nanages retail, o	office and indust	rial properties	primarily located	in the Northeast and the
Type of Business Organization		<u>.</u>				
☐ corporation	□ limited partner	ership, already 1	formed	_	4	· ^ `
☐ business trust	☐ limited partne	ership, to be for	med		other (please spec	PROCESSED
		Month	Year			
Actual or Estimated Date of Incorpo	ration or Organizatio	n: 1 0	9 6 🛭 Ac	tual 🗆 Estim	ated	D JUL 2 2 2002
Jurisdiction of Incorporation or Org		ط استعادیا	ت ا	eviation for Sta	ate:	THOMPON
,			ther foreign juri			THOMSON FINANCIAL
<u> </u>					<del></del>	

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Each general and managing partner of partnership issuers.  Check Box(es) that Apply: □ Promoter ☒ Beneficial Owner □ Executive Officer  Full Name (Last name first, if individual)  Vornado Realty Trust  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter ☒ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Roth, Steven  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019	□ Director  ☑ Director or     Trustee  ☑ Director or     Trustee	General and/or Managing Partner  General and/or Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner ☑ Executive Officer  Full Name (Last name first, if individual)  Roth, Steven  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☑ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	Trustee  ☑ Director or	Managing Partner  ☐ General and/or
888 Seventh Avenue, New York, New York 10019   Check Box(es) that Apply: □ Promoter ☑ Beneficial Owner ☑ Executive Officer   Full Name (Last name first, if individual)   Roth, Steven   Business or Residence Address (Number and Street, City, State, Zip Code)   888 Seventh Avenue, New York, New York 10019   Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☑ Executive Officer   Full Name (Last name first, if individual)   Fascitelli, Michael D.   Business or Residence Address (Number and Street, City, State, Zip Code)	Trustee  ☑ Director or	Managing Partner  ☐ General and/or
Check Box(es) that Apply: □ Promoter ☒ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Roth, Steven  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	Trustee  ☑ Director or	Managing Partner  ☐ General and/or
Full Name (Last name first, if individual)  Roth, Steven  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply:	Trustee  ☑ Director or	Managing Partner  ☐ General and/or
Roth, Steven  Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	<del></del>
Business or Residence Address (Number and Street, City, State, Zip Code)  888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	<del></del>
888 Seventh Avenue, New York, New York 10019  Check Box(es) that Apply: □ Promoter □ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	<del></del>
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer  Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	<del></del>
Full Name (Last name first, if individual)  Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)	<del></del>	<del></del>
Fascitelli, Michael D.  Business or Residence Address (Number and Street, City, State, Zip Code)		Managing Partner
Business or Residence Address (Number and Street, City, State, Zip Code)		
888 Seventh Avenue, New York, New York 10019		,
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Hakim, Joseph		
Business or Residence Address (Number and Street, City, State, Zip Code)		
888 Seventh Avenue, New York, New York 10019		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☒ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		<del></del>
Macnow, Joseph	·	
Business or Residence Address (Number and Street, City, State, Zip Code)		
888 Seventh Avenue, New York, New York 10019		
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer	☑ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		
Mandelbaum, David		
Business or Residence Address (Number and Street, City, State, Zip Code)		
888 Seventh Avenue, New York, New York 10019		

A. BASIC IDENTIFICATION DATA

Each promoter of the issuer, if the issuer has been organized within the past five years;

2. Enter the information requested for the following:

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Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Simon, Stanley					
Business or Residence Addre	ess (Number and	d Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director or Trustee	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)				
West, Richard W.					
Business or Residence Addre	ess (Number and	d Street, City, State, Zip C	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Targan, Ronald G.					
Business or Residence Addre	ess (Number and	d Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Wight, Jr., Russell B.					
Business or Residence Addre	ess (Number and	d Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019	·		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Greenbaum, David R.					
Business or Residence Addre	ess (Number and	d Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019	· · · · · · · · · · · · · · · · · · ·	······································	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Rowan, Richard T.					
Business or Residence Addre	ess (Number an	d Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019			

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Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Smith, Robert H.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first, i	f individual)				
Interstate Properties					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
210 Rt. 4E, Paramus, New	Jersey 07652				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Blum, Melvyn H.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)		-		
Felman, Michelle					
Business or Residence Addre	ss (Number and	l Street, City, State, Zip C	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director or Trustee	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Kogod, Robert P.					
Business or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☑ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, i	f individual)				
Covington, Alec C					
Business or Residence Addre	ss (Number and	1 Street, City, State, Zip (	Code)	<del></del>	
888 Seventh Avenue, New	York New York	10019			

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Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner		☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				
Kennedy, Christopher					
Business or Residence Addre	ss (Number and	Street, City, State, Zip (	Code)		
888 Seventh Avenue, New	York, New York	10019			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)				
GSEP 1999 Realty Corp. of Business or Residence Address					
One New York Plaza, New	York, New York	10004			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first,	if individual)				<del>_</del>
GSEP 2000 Realty Corp. of	/o Goldman Sach	s 2000 Exchange Place Fu	and, L.P.		
Business or Residence Addre					
One New York Plaza, New	York, New York	: 10004			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)			<del></del>	
GS-MSD Select Sponsors, 1	LP c/o Goldman	Sachs & Co			
Business or Residence Addre			Code)		· · · · · · · · · · · · · · · · · · ·
One New York Plaza, New	York, New York	: 10004			
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or  Managing Partner
Full Name (Last name first,	if individual)	· · · · · · · · · · · · · · · · · · ·			<del></del>
Commonwealth Atlantic Pr	onerties Inc				
Business or Residence Addre		1 Street, City, State, Zip (	Code)	<del></del>	
66 Canal Center Plaza, Suit	te 710 Alexandria	viroinia 22314			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or
Full Name (Last name first,	if individual)				Managing Partner
Business or Residence Addre	ess (Number and	d Street, City, State, Zip (	Code)		
				····	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

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				<b>B.</b> ]	INFORMA	TION AF	SOUT O	FFERING	<u> </u>					
													Yes	No
1. Has	the issuer s	sold, or doe							_				$\boxtimes$	
				-	opendix, Co		_							
2. Wha	at is the mir	nimum inve	stment that	will be acc	epted from	any indivi	dual?	• • • • • •					\$ <u>Non</u>	<u>ie</u>
3. Doe	s the offerin	ng permit jo	oint owners	hip of a sin	gle unit? .	'					• • • • • •		Yes ⊠	No
com pers list t	er the information or on to be list the name of er, you may	similar rem ted is an as: the broker	uneration for sociated per or dealer. I	or solicitati son or age of more that	on of purch nt of a brok n five (5) pe	asers in co er or deale ersons to b	onnection er register be listed a	with sale red with t re associa	s of secur he SEC au ited person	ities in the nd/or with ns of such	e offering.  a state or  a broker	states, or		
Full Nam	ne (Last nan	ne first, if i	ndividual)											
Business	or Residen	ce Address	(Number ar	nd Street, C	City, State,	Zip Code)						<u></u>		
Name of	Associated	Broker or l	Dealer	<del></del>	<u> </u>	,		<u></u> '			<del></del>			
States in	Which Pers	on Listed F	las Solicited	d or Intende	s to Solicit	Purchasers	3							
(Check	"All States'	or check i	ndividual S	tates)										States
[AL] [IL] [MT]	[AK] [IN] [NE]	[AZ] [IA] [NV]	[AR] [KS] [NH]	[CA] [KY] [NJ]	[CO] [LA] [NM]	[CT] [ME] [NY]	[DE] [MD] [NC]	[DC] [MA] [ND]	[FL] [MI] [OH]	[GA] [MN] [OK]	[HI] [MS] [OR]	[ID] [MO] [PA]	•	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		—
Full Nam	ne (Last nan	ne Iirsi, ii i	ndividual)											
Business	or Residen	ce Address	(Number ar	nd Street, C	City, State,	Zip Code)								
Name of	Associated	Broker or l	Dealer						· <u> </u>					
States in	Which Pers	on Listed F	Ias Solicited	d or Intende	s to Solicit	Purchasers	<u> </u>							
(Check	"All States'	or check i	ndividual S	tates)									□ Ali	States
[AL] [IL] [MT] _[RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SD]	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		
Full Nam	e (Last nan	ne first, if i	ndividual)						<del></del>					
Business	or Residence	ce Address	(Number ar	nd Street, C	City, State, 2	Zip Code)		······································				<del> </del>		
Name of	Associated	Broker or l	Dealer		<u> </u>							7.		
States in	Which Pers	on Listed F	Ias Solicited	d or Intende	s to Solicit	Purchasers	<u> </u>					- · -		
(Check	"All States"	or check i	ndividual S	tates)									□ All	States
[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	[AZ] [IA] [NV] [SDI	[AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering,		
check this box \( \simega\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. *The issuer has acquired property from a Virginia limited partnership. In exchange for the property, Vornado Units have being issued to holders of partnership interests in First Gateway Associates Limited Partnership.		
Type of Security	Aggregate Offering Price	Amount Alread
Debt	\$0	\$0
Equity	\$0	\$0
☐ Common ☐ Preferred		
Convertible Securities (including warrants)	\$0	<u> </u>
Partnership Interests (Class A units of limited partnership interest ("Vornado Units")	\$ <u>13,680,576</u> *	\$ 13,680,576*
Other (Specify)	\$0	\$ 0
Total	\$ 13,680,576	\$ 13,680,576
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	, et	<b>A</b>
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	69	\$ 11,545,254
Non-accredited investors	19	\$ <u>2,135,322</u> \$
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
	Type of	Dollar Amount
Type of offering	Security	Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$ \$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securit offering. Exclude amounts relating solely to organization expenses of the issuer. The information m given as subject to future contingencies. If the amount of an expenditure is not known, furnish an escheck the box to the left of the estimate. *	ay be timate and	
Transfer Agent's Fees	-	\$*
Printing and Engraving Costs		\$ <u>*</u>
Legal Fees		\$*
Accounting Fees		\$*
Engineering Fees		\$*
Sales Commissions (specify finders' fees separately)		\$*
Other Expenses (identify)	<del></del>	\$*
Total		\$ *
* Costs incurred by Vornado Peolty I. P. in connection with the issuance and distribution of the Vornage		deducted from the

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

NY12524: 58540.1

<sup>\*</sup> Costs incurred by Vornado Realty L.P. in connection with the issuance and distribution of the Vornado Units will not be deducted from the \$13,680,576 value of the Vornado units issued. Vornado Realty L.P.has not received any cash proceeds from such issuance and therefore, such costs do not affect the adjusted gross proceeds to the issuer reported below.

C. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPENSE	S ANI	USE	OF PROCI	EEDS		
b. Enter the difference between the aggrequestion 1 and total expenses furnished in the "adjusted gross proceeds to the issuer."  * The issuer is not receiving any cash preconnection with the issuer's acquisition.		\$ <u>13,680,576*</u>					
used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed ne amount for any purpose is not known, furni he estimate. The total of the payments listed n set forth in response to Part C - Question 4.b a	sh an nust ec	lnaj				
			D	ayments to Officers, irectors, & Affiliates		Pa	lyments To Others
Salaries and fees			\$	0	_ 🗆	s	0
Purchase of real estate	******		\$	0		<b>\$</b>	0
Purchase, rental or leasing and insta	llation of machinery and equipment		\$	0		<b>s</b>	0
Construction or leasing of plant built	dings and facilities		\$	0		s	0
offering that may be used in exchang	uding the value of securities involved in this ge for the assets or securities of another		\$	0	_ 🛭	S <u>1</u>	3,680,576
Repayment of indebtedness			\$	0		s	0
Working capital			<u>\$</u>	0		\$	0
Other (specify):			<b>\$</b>	0		s	0
			\$	0		S	0
Column Totals			<u>\$</u>	0	. 🛭	\$ <u>13</u>	,680,576
Total Payments Listed (column totals	added)			⊠ <u>\$ 1</u> :	3,680,5	76	
	D. FEDERAL SIGNATURE						
constitutes an undertaking by the issuer to furni	I by the undersigned duly authorized person. If this is to the U.S. Securities and Exchange Commis vestor pursuant to paragraph (b)(2) of Rule 502.	is notic sion, u	e is file pon wr	d under Rule itten request	505, the of its st	follows aff, the	ing signature information
ssuer (Print or Type)	Signature			Date			
Jornado Realty L.P.	asil Mein			July 1, 20	02		
Name of Signer (Print or Type)	Title of Signer (Print or Type)						
oseph Macnow	Executive V.P. and Chief Financial Office	r of V	ornado	Realty True	t, Gene	ral Par	tner
	ATTENTION						
Intentional misstatements or om	issions of fact constitute federal crimi	nal v	iolatio	ons. (See 1	.8 U.S	.C. 10	001.)

NY12524: 58540.1

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SEC 1972 (7/00)

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